G. R. S. IX-5]

Previous references.

File No. 22-18

1918.

Serial Nos. 163

(Sanj)

Later references.

P

GENERAL AND REVENUE SECRETARIAT.

741/E

Serial Nos. Three

Part B for January 1920

SUBJECT.

Sanitary Conference

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(1) To, The Sanitary Commr,
No 3453 dt 15-8-18

Recvd with certain observation the report on the proceedings of the Sanitary Conference held at Bijapur on 22-6-1918

W. D 1250—GPB—30,000 28-1-19

15/1/20.

G. R. S. III—1] 1918-19 1937 1

GENERAL AND REVENUE SECRETARIAT.

(Sanitary)

NOTES.

File No. 22

FILE HEADING.

Sanitary Conference

From

The Sanitary Commissioner

No. G.C.76 Dated 29.7.18 Received 30.7.18

Diary No. 1937	Enclos. 4 Spare Copies.	Serial No. 1

BRIEF ABSTRACT OF LETTER.

Submits for information a report on the proceedings of the Sanitary Conference held at Mysore ~~held~~ on the 22nd June 1918.

NOTES AND ORDERS.

Submitted with draft.

The original file is not traceable

2 In favour of approval.

2.8.18

Chief Secretary) The draft may be approved.

The Sanitary Commissioner may also be permitted to get

NOTES—First Sheet.

WD 1232—GPB—20,000—18-11-16

1917

2

G. R. S. III-2]

General and Revenue Secretariat. | Sm File No. 22 of 1918-19

Serial No.

the report & papers read at the conference printed.

1st member

cdy 578/18

4 Eds. I approve

Lees

9/8

Jsone 8/9/18

2 L S 2 The Navy Com

No. f. 34538 15-8-18

Record Cl. 4 with Captain Otter's

proposal that will be found in para 3 of his note.

Jsone 8/9/18

19.8.18

Jus 4

3 To The Navy Com No. f. 3782 of 20.8.18

In continuation of that above I state that the report and papers read at the Navy Conference may be forwarded at the first pers and a dozen copies sent to this Office

NOTE—Contn. sheet.

B 12/1

PROTECTION BRANCH. 12 JAN 1920

WD A 1789—GPB—60,000—20-3-18—S.

WD 02785—GPB— 79,000—25-2-17—S.

191

From

The Sanitary Commissioner in Mysore

To

The Chief Secretary to Government of Mysore

16297

Dated 29th July 1918

Despatched

Received

General No. G.C. 76.

No.

Enclosure No. 4

REV. SEC. 30 JUL 1918

Submitting a report on the proceedings of the Sanitary Conference held at Mysore on the 22nd and 23rd June 1918.

GEN. SECRETARIAT JUDICIAL 30 JUL 1918

DIA... 4193

19 -10

Office of the Sanitary Commissioner
with the Government of Mysore,
...

No: S.C.76 Ed:4. Dated, Bangalore the 29 July 1918.

From

Dr. M. Srinivasa Rau, M.A., M.D., D.P.H.,
Sanitary Commissioner with the Government of
His Highness the Maharaja of Mysore, Bangalore.

To

C.S. Balasundaram Iyer, Esquire, B.A.,
Chief Secretary to the Government of
His Highness the Maharaja of Mysore,
B a n g a l o r e .

Sir,

I have the honor to submit herewith for the information and orders of Government a report on the proceedings of the Sanitary Conference held at Mysore during the Birth-day week under Government Order No. 6439-40 Sany. 116-17-4 dated the 17th May 1918.

I have the honor to be,
S i r ,
Your most obedient servant,

M Srinivasa Rau

M.A., M.D., D.P.H.,
Sanitary Commissioner.

P.H.

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MEMORANDUM.

In accordance with Government Order No. 6439-40 Sany. 116-174 dated the 17th May 1918 the first Mysore Sanitary Conference was held in the Durbar Hall of the Public Offices at Mysore on Saturday and Sunday the 22nd and 23rd June 1918, the Sanitary Commissioner presiding.

The following gentlemen were present; Rajaseva Dhurina Sirdar Mr. M. Kantaraj Urs, B.A., C.S.I., Mr. P. Raghavendra Rao, B.A., B.L., Raja Sabha Bushana Dewan Bahadur Mr. K.P. Puttanna Chetty, C.I.E., Mr. K.R. Srinivasa Iyengar, M.A., Mr. C.S. Balasundaram Iyer, B.A., Mr. M.A. Narayan Ayangar, Mr. K. Matthan, Mr. C. Venkata Rao, Mr. Mahomed Zahiruddin Meccai, Mr. B. Venkoba Rao, Mr. C. Devaraj Urs, Mr. T. Chokkanna, Mr. K. Mylar Rao, Mr. B.T. Kesava Iyengar, Mr. R. Ranga Rao, Dr. E.S. Krishnaswami Iyer, Mr. C. Rajaram Rao, Dr. T.V. Kuppuswami Mudaliar, Dr. C.A. Nanjappa, Dr. S. Subba Rao, Dr. D.S. Puttanna, Mr. N. Rangachar, Rajasilpi Visarada Rao Bahadur Mr. B. Subba Rao, Mr. S. Cadambi, Mr. D.G. Dani, Mr. T. Lakshmana Rao, Mr. V. Rangaswami Iyengar, Mr. J. Bhore, Mr. M.G. Rangaiya, Mr. S.H. Lakshminarasappa, Mr. N. Subba Rao, Mr. B. Krishna Rao, Dr. J.V. Mascarenhas, Dr. J.V. Karve, Dr. F. Fernandez, Mr. B. Krishnamurthi Rao, Mr. C. Narayana Rao, Mr. M.G. Srinivasa Peidpett, Mr. P. Parthasarathi, Mr. R. Gopalaswami Iyer, Mr. H.R. Krishnamurthi Rao and Mr. B. Narasinga Rao.

3. The proceedings commenced at 8 A.M. on Saturday when the Sanitary Commissioner delivered the opening speech to the Conference. Afterwards Mr. M.A. Narayan Ayangar, Deputy Commissioner, Shimoga District, spoke in appreciative terms about the objects of the Conference. He hoped that that the Conference, which was started with a modest beginning, would in time find for itself a place not less important than that of the Departments of

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of Industries, Education, Agriculture and Co-operation. Although the Sanitary Section formed a feature of almost every District or Taluk Conference, a Central Departmental Conference was, he said, vital in the interests of sanitary progress as a whole in the State. He suggested the formation of a standing committee of the Sanitary Conference to take stock of the sanitary needs from time to time and give continuous attention in order that the conclusions presented at each Conference might, under orders of Government in each case be actively developed to form part of the sanitary policy in the State.

Raja Sabha Bushana Dewan Bahadur Mr. K.P. Puttanna Chetty, C.I.E., in summing up the present situation referred to the great advance made from day to day in our knowledge about the origin and mode of spread of communicable diseases, Plague, Cholera, Tuberculosis, Malaria and indicate the scope of work of sanitary conferences which he thought should form a permanent feature of the Sanitary Administration in Mysore.

4. The marginally noted papers submitted by the Departmental Officers were then taken as read and discussions on the various subjects proceeded with. A list of the subjects, a summary of the discussions and the resolutions passed will be found in the appendix to this memorandum.

5. At the close of the discussions on Sunday the 23rd June 1918, the Sanitary Commissioner concluded the session with a short speech thanking the Heads of Departments and of Districts present,

(1) Gleanings from work in the Public Health Department of Kolar Gold Fields - by Mr. J.V. Mascarenhas, M.B., D.P.H.,

(2) A few observations on the Public Health conditions of Kadur District by Mr. B. Krishna Rau, L.M.S., L.S.Sc., District Health Officer.

(3) An Indian Creche in Bangalore. (A reprint of the contribution to the Indian Medical Gazette on the subject by Mr. S. Amritraj, L½R.C.P.S., D.P.H.,

(4) Note on the appointment and duties of Lady Health Visitor, Civil and Military Station, Bangalore, by Mr. S. Amritraj,

(5) The need for State Legislation to control untrained practising midwives in India with a few observations on the importance of promoting maternity and Infant welfare - by Mr. S. Amritraj, L.R.C.P.S., D.P.H.,

(6) Medical inspection of school children by Mr. J.V. Mascarenhas, M.B., D.P.H.,

(7) Village Improvement - by Mr. J.V. Mascarenhas, M.B., D.P.H.,

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present, for their co-operation.

M.A., M.D., D.P.H.,

Sanitary Commissioner.

P.H.

Appendix I.

Opening speech by the Sanitary Commissioner.

I beg to offer you all a cordial welcome to this Conference. In this enlightened age it is unnecessary for me to justify the holding of a Conference like this, which brings together all people interested in sanitation, enables them to exchange views, provokes them to discussions, lets in fresh light on various topics from unexpected quarters, and leads them to find a way out of many a difficulty which at first sight appeared to be insuperable.

It is not quite 16 months since the Department of Public Health was organised as a separate entity and in this short period, the Province has passed through 2 severe epidemics of Cholera and one of Plague. The officers connected with the Public Health Department had a very trying time of it and their efforts in combating these epidemics had a gratifying measure of success. Their experiences will doubtless form a valuable record but they are all hidden in official files which have no chance of seeing the light of day. Each one of them is bound to have met with difficulties and must have overcome them somehow or other. On occasions like this, when freed from official trammels, a recital of successes and failures, will be to the mutual benefit of all concerned.

Our conception of Public Health has undergone considerable change during the last decade. In my student days, we were taught that disease arose from bad surroundings, that general good health was a sufficient protection against infection by specific disease and that

that sanitation was concerned with attention to general cleanliness of the environments. But the results of recent medical research, have changed all this and attention is now concentrated more on the individual and less on the environments. The term " disease carrier " has not only permeated the thoughts of medical men and sanitarians but has filtered down even to the educated laymen. In the case of all communicable diseases, the source of infection is man or some other animal and till the route by which infection is disseminated, is demonstrated, all the efforts of sanitarians to check the spread of disease are bound to fail and entail waste of money.

It has been known that water is the chief medium through which Cholera vibrio is transmitted from the Cholera carrier to healthy men. But in the last epidemic that we had at Mysore City, the part which flies played in the transmission of Cholera vibrio, mechanically from the excreta to the food of men was well demonstrated; therefore our efforts towards checking an epidemic should not be confined only to the treating of water supplies with potassium permanganate but should extend to the prevention of the breeding of flies. Last year there was a phenomenal number of flies in various parts of Mysore City but it has not been so this year. The Health Officer of Mysore will doubtless furnish an explanation. Again, in our dealings with this epidemic the scarcity in these times of war of potassium permanganate was much felt in various places. The quantity available was not sufficient to meet all demands and the price of the drug also went up abnormally. Therefore faced with this problem we had recourse in many places to the use of quicklime which was found to be almost as effective as potassium permanganate. The use of quicklime has this advantage over that of potassium permanganate, that it

it does not impart any colour to the water and thus scare away some foolish people to more dangerous sources of water supply. The Presidents of Districts and Taluk Boards and of Municipalities, when threatened without outbreak of Cholera should keep a stock of quicklime sufficient to meet all likely demands and ~~disinf~~ disinfect all wells which are in danger of becoming infected. The protection of wells by fitting them with hand pumps has been advocated many times but has not been carried out except in two places so far as I know. In one of them, the handle of the pump had been taken away during the time of my visit and in the other, it was being fairly worked. All the frontier villages which are exposed to Cholera invasion must have the drinking water wells protected by pumps.

A question that deserves consideration is the influence of jatras in starting cholera epidemics. The jatra at Mahadesvaranbetta in the Coimbatore District last year and that at Yediyur in Tumkur District this year are fearful examples of what jatras can do in starting and spreading Cholera epidemics. Proper precautions ought to be taken, many days previous to the commencement of the jatras, all wells being quicklimed or permanganated and all heaps of manure and night soil being so disposed of as not to breed flies.

It may not be out of place to mention here that the chief burden of prevention of cholera and other epidemics falls, as it ought to fall on the Revenue Officers of the Districts and Taluks. In most cases they cheerfully help the officers of the Public Health Department in preventing the spread of the disease. But

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But while acknowledging the assistance given by the great majority, I ought not to omit a reference to a few who think that their duty in epidemic times ends with giving the information to the officers of the Public Health Department. Our Departmental Officers are purely advisory in their functions and have no executive powers and if the executive officers stand by with folded hands, we can accomplish but little in preventing the spread of the disease.

Turning to Plague, which is the other great disease which periodically, almost annually, visits various parts of our Province, I may say that our ideas of prevention of epidemics of this disease have undergone a remarkable modification in view of the recent researches by the officers working under the Plague advisory committee appointed by the Government of India. It has been proved that the rat-flea is in the very great majority of cases, the only medium by which Plague bacilli are transferred from the rat which is the chief " Plague Carrier " to the human being. The best way of avoiding Plague is to construct rat-proof buildings and to live so as not to come into contact with susceptible animals belonging to the Rodent Family. But when this is unattainable, the next best thing to do would be to destroy rat-fleas which desert the dead bodies of rats and remain infective for 6 to 7 weeks. This is very easily done by the spreading of paddy straw or any other inflammable material evenly on the floor of every part of the house and setting fire to it. The fleas and in fact all vermin of that kind are killed in the course of a few minutes and the house becomes habitable again immediately afterwards. Instead of having recourse to this simple method, people wait till human cases occur and then when too late, evacuate the houses and camp

camp outside in fileds for periods extending from 3 to 6 months. They have been encouraged to do this in the past and when now they are asked to desiccate their houses before they lock them up, they consider themselves as very ill-used. If wholesale evacuation is thoroughly carried out, no sanitarian would object to it, though he might feel pity for the deluded people who put themselves to trouble and expense unnecessarily. But what really happens is that the locked-up houses are frequently visited by the owners either openly or secretly. In either case, the infective fleas which remain alive and hungry, bite the men that come into the house and infect them with Plague bacilli. The people who then go back to the sheds get Plague and their relations and friends hold up their hands in horror and proclaim that evacuation of houses and camping out are no good. Very many actual instances can be cited of villagers evacuating their houses and reoccupying them within a month or so without disinfecting them and suffering severely from Plague as a consequence. Human bubonic and septicaemic cases which are really harmless from the point of view of the spread of the disease to others, are feared, while the dangerous rat-fleas are taken no account of. The only remedy for this state of things is to dispel ignorance and place the correct facts before the people.

A third disease which is ever present with us and which carries off more people than all the epidemic diseases put together is malaria. Here again the chief enemy we have to contend with is ignorance on the part of the populace. Medical Research has shown the methods of spread of malarial parasites and of the means to check it, but very little has been attempted and much less accomplished in the way of lessening the incidence of malaria. Malarial surveys which are absolutely necessary for the collection of requisite

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requisite data, have been completed in the case of Seringapatam and are in progress in selected villages in Nagar Taluk. The proposals for the abatement of malaria in Seringapatam are before the Government and orders are awaited. It is not the Malnad portions alone that are malarious, but many of the maidan parts are quite as bad. Statistics show that places like Arsikere, Tiptur, Maddagiri etc are becoming more and more malarious and in Arsikere a large number of deaths from a malignant type of malarial fever was noticed last year. This is an ever present problem and can be dealt with only by concerted and continuous action on the part of District Boards and Municipalities, and by the maintenance of anti-malarial operations as a routine part of their work. Work by fits and starts effects very little good and is to be deprecated wherever found.

Tuberculosis in its mainfold forms is the curse of advancing growth of cities. Overcrowding, poverty and drunkenness are the evils inseparable from an urban life and all persons whose resisting power is lowered by these adverse conditions fall victims to the ubiquitous tubercle bacilli. The construction of a sanatorium for the use of these afflicted persons merely touches the outer fringe of the evil when it has become irreparable. The real solution consists in improving the housing accommodation of the poor people, removing from their close proximity the temptation to drink and in encouraging the people to spend more of their wages on food and less on drink if the latter cannot be altogether abolished. The establishment of a tuberculosis dispensary in each of the Cities of Bangalore and Mysore is very essential if any good is to be expected from the sanatorium.

Another great problem which has always faced us, is

is the terrible infantile mortality. The causes are well known but the remedies still remain to be applied.

I wish to refer to one other disease which is of peculiar interest to the state as a whole and to some parts of malnads in particular, Venereal diseases eg., ~~syphi~~ syphilis and gonorrhoea are said to prevail most extensively both in males and females. The gradual diminution of population in the malnads may not only be due to malaria and its sequelae but to the prevalence of venereal diseases which play an important part in preventing conception, in causing premature births and abortions and in increasing the deaths of infants. I wish that those of you who may have studied the question nearer at home may be able to contribute to our discussions on this subject. All practical suggestions for the treatment and prophylaxis of these dire diseases will be welcome.

In this connection, it might be said that for the state to concern itself with such topics is an unwarranted interference with private individual rights. The term " Human rights " sounds well but has no basis in fact. The 20th century recognises only inalienable duties rather than rights and the duty of preserving health is one of these. Free conduct is impossible as long as there is more than one man in the world. Every man's health is not his own private possession to be regulated as he sees fit. If the loss of such a man's health affected no one but himself, we should not quarrel with such a view. The prosperity and comfort of society are altogether dependant upon the health and strength of its individual members and all those who become physically incapacitated lessen the total efficiency of the whole community. Therefore the preservation of private health of the individual is a matter of public concern and any Government will be justified in interfering with the so-called " private rights ", when the interests and

and welfare of the community are concerned. Thus compulsory incarceration of offenders, compulsory payment of taxes, compulsory education, compulsory medical inspection of school children and compulsory vaccination have all been enforced and are acquiesced in. Why therefore should not the spread of diseases like syphilis and gonorrhoea be brought under control by the adoption of measures such as, supervision of prostitutes and compulsory registration and treatment of all prostitutes?

Though I have touched only a few of the subjects which appeared to me to be important, it must by no means be thought that the others are of any less importance. I hope that the discussions thereon will throw a flood of light on them and enable us to deal with them in a practical way.

I beg to conclude with these words of the late Sir Pardy Lukis.

" Our main efforts ought to be centred on the protection of the community against attack by infectious diseases rather than on the attempt to cure individuals of ailments from which they ought never to have suffered "

Appendix III.

Summary of discussion.

Subject No. 1 - Control of Cholera epidemic.

Mr. Matthan referred to the part played by flies in the spread of Cholera and enquired how best the fly pest could be minimised. He also suggested that perhaps legislation might be necessary to enable the executive officers to enter premises and prevent conditions that favour the breeding of flies.

Mr. J.V. Karve observed that Cholera was the result of filth and flies. He gave his own personal experiences in the matter of the prevention of the breeding of flies and was of opinion that each individual should exert himself to safeguard the community as a whole. He deprecated any legislative measures and believed that persuasion would effect more good. He urged greater attention being paid to the general sanitation and particularly to the conservancy of suburban villages.

Dr. E.S. Krishnaswami Iyer suggested that the best way to prevent breeding of flies would be to cover up all manure heaps with a layer of earth. He was in favor of having the pit system in villages provided that the wells were not endangered by their proximity to the pits.

Mr. Zahiruddin Meccai observed that the question of dealing with manure in villages was attended with difficulties and that it was hopeless to expect the villagers to cover up the manure with earth. He also explained the design for a moveable latrine for use in connection with the trench system in villages.

Mr. C.S. Balasundaram Iyer said that manure was a valuable and indispensable commodity to the villagers. As it was impossible to expect the ryots to carry the

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the manure to a distance and cover it up by earth, he suggested that a plot of ground near to village should be parcelled out into spaces for the storing of manure for the disposal of night soil in a village, the trenching system appeared to him to be the best. He also advocated the systematic fitting of pumps to the wells in villages exposed to attacks of Cholera.

Mr. K.R. Srinivasa Iyengar was in favor of the education of people for the local adoption of preventive measures.

The Conference adopted the following resolution for submission to the Government:

I.

(a) Water supplies along trade routes should be protected against contamination.

(b) Whenever a village becomes infected with Cholera, notices of the outbreak in that village should be put up in the Chavadies of surrounding villages.

(c) Every village should be provided with a plot of ground parcelled out into small areas for the storage of manure. As far as possible the villagers should be instructed to keep the heaps of manure covered by fresh earth..

(d) The Taluk and Hobli Head Quarters should have a stock of potassium permanganate and of quicklime for disinfecting wells.

(e) The suburban villages should receive special attention so as to minimise danger of infection of towns and cities.

(f) A proper staff should be maintained for Cholera prevention duty in each District.

Subject No. 2 - Control of Plague Epidemic.

Dr. Krishnaswami Iyer emphasised the need for

for directing attention towards controlling the disease at the tail end of the epidemic with a view to limit the chances of the infection being carried through the next generation of rats to start a new epidemic under favorable atmospheric conditions. He said that rat destruction as a means of preventing Plague could be effective only in the off-season.

Mr. K. Mylar Rao suggested that according to a circular recently issued by the Government of India, extermination of rats could be undertaken at all times.

The Chairman explained that the best results at a small cost were attainable only in the off-season.

Mr. B. Krishnamurthi Rao said that in Japan a day in the week is set apart for tidying up houses and killing of rats. If some such arrangement could be enforced here, appreciable good might result.

Mr. C.S. Balasundaram Iyer ~~asked~~ suggested that the Executive Officers of the Sanitary Department ~~to~~ might consider what rules were feasible.

Mr. M.A. Narayan Ayangar then referred to disinfection. He said that if disinfection could be promptly resorted to on the occurrence of rat mortality, the need for entire villages and towns having to be shifted to temporary huts would cease. Wholesale evacuation of infected villages could be totally avoided and the people saved the expense, the inconvenience and the anxiety incidental to the temporary enforced life in sheds. The whole matter was, in his opinion, one of popularisation of the ideas underlying disinfection. At the same time, the question was intimately associated with that of keeping the premises rat-free both as a measure of permanent utility as well as a sequel to preserve the

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the efficacy of the disinfection.

Mr. J.V. Karve recommended that in suburban areas the construction of rat-proof houses should as far as possible be insisted upon.

Mr. K. Matthan in referring to the different agencies Revenue, Medical and Sanitary - expected or employed to take action to combat epidemics, pointed out the desirability of co-ordinating their various duties to prevent overlapping of functions and consequent diminution in efficiency.

The resolution to be recommended to the Government is as follows:

II.

(a) The systematic destruction of rats particularly in the off-season of Plague should be aimed at,

(b) disinfection by the process of desiccation should be popularised,

(c) wholesale evacuation of villages should not be enforced,

(d) rat-proofing of houses should be encouraged,

(e) the existing plague rules, which were framed in 1898 should be suitably amended and brought up-to-date.

Subject No. 3 - Malarial Surveys and application of anti-malarial measures -

The President observed that a malarial survey was only a means to an end. By itself it was of no use whatever in checking malaria. It simply serves to furnish data on the basis of which the anti-malarial measures were to be framed.

Mr. J.V. Karve recommended that malarial surveys should be undertaken in selected areas in each District

District and that the application of anti-malarial measures should be started immediately on the completion of the survey in each place.

In reply to Mr. M.A. Narayan Ayangar's enquiry as to the practical utility of one survey already carried out viz. that at Seringapatam, the President explained that before the survey was instituted the shifting of the town from its present surroundings was seriously proposed as the only remedy for the evil. The actual survey showed that the chief breeding places of mosquitoes were the numerous unused wells and karanjis in the town. The expenditure of less than a thousand rupees on the preliminary scientific study of the local conditions had thus saved large sums of money which otherwise might have been spent on the " improvements " proposed. On the positive side also the survey indicated precisely what detailed measures were necessary to reduce the prevalent unhealthiness.

The following resolution was adopted:

III.

This Conference is of opinion that malarial surveys should be undertaken in a few of the typically unhealthy tracts in each district that the Government be requested to depute some of its sanitary officers for training in Tropical Schools and that when any surveys are finished and recommendations regarding the anti-malarial measures are submitted, prompt and continuous action be taken.

Subject No. 4 - Legislation to ensure a pure food-supply especially of milk and milk-products.

The President observed that this was an important subject to which he made no reference in his introductory address. It was well recognised that food-stuffs were adulterated and very often to the detriment of the health

health of the consumers. Adulteration of food-stuffs was practised as a fine art in European countries in spite of legislative enactments and heavy fines imposed by the Magistrates. Merchants in India were not very far behind in the matter of mixing of undesirable things with food-stuffs but there was no law by which the offenders could be punished. Any admixture which was noxious to health could be brought under the provisions of the Penal Code but most of the substances used for adulteration could not be brought under that head and the offenders escaped scot-free. The only thing for which they could be punished was for selling an article which was not what it was represented to be. Thus if any man asked for ghee and was given a stuff which was mixed with animal or vegetable fats, the buyer could prosecute the seller for trying to sell him an article which was not what it purported to be. But if the seller said that what he sold was not pure ghee but a mixture of ghee with foriegn fats, the buyer might refuse to buy it but had no legal remedy. There was hardly an article of diet which was not adulterated in some way or other; but without any legislative enactments it was hopeless to check this evil. Many of the members of the Conference were Magistrates and had occasionally to deal with such cases and a clear expression of their opinion as to what was desirable, would strengthen the hands of the Government in dealing with the problem.

All present were unanimous in the opinion that legislation was necessary, particularly as regards milk and milk-products eg., ghee.

Questioned as to why, when milk could be boiled and rendered sterile before use, any legislation was called for, the Chairman remarked that milk deprived of its nutritive elements was of little value as food to the

the infants and that its purity chemically had also to be assured.

Mr. Rangaswamy Iyengar suggested that legislation might extend to cows to prevent the sale of milk taken from tuberculous cows.

The following resolution was adopted -

IV.

This Conference is of opinion that the Government should be approached to legislate in the matter. Legislation may be on the lines of the English food and drugs act, milk regulation, butter act etc. Standards should be fixed for milk, butter, ghee, etc.

Subject No. 5 - The necessity for the introduction of compulsory vaccination throughout the State.

The President remarked that he be believed this was a subject on which there could be no two opinions in this Conference. During a recent outbreak of smallpox in Kalale a large number of children died. The disease stopped as soon as the remaining children were vaccinated. In most of the Municipal Towns vaccination had been made compulsory and the value of the measure was recognised by the majority of the urban population. It was however different in rural areas especially of the malnads. Practically every one of the Amildars with whom he had had a talk on the subject was in favor of vaccination being made compulsory in all the rural parts. Now that the re-organisation of the subordinate staff of the Vaccination Department has been effected and provision made for the proper supervision of the work of the Vaccinators, there ought to be no difficulty enforcing vaccination all through the State.

Mr. J.V. Karve explained how since the introduction

introduction of the compulsory regulation small-pox has practically been stamped out in England, Japan and other advanced countries. Children were an asset to the country and every effort should be made to prevent loss of infant life. He urged the compulsory vaccination within 6 months after birth and compulsory revaccination in the 8th year and again in the 12th year. The occasional fatal cases and bad results need not stand in the way as they were due to faulty methods of vaccination & had nothing to do with the lymph. He suggested that if necessary a conscientious objector's clause may be added in the regulation.

Mr. B. Krishna Rao pointed out that vaccinators are hardly to blame when parents themselves neglect the vaccinated children or smear the vesicles with cow dung. He was however of opinion that arrangement should be made for the better preservation of the lymph.

Mr. Zahiruddin Meccai urged that until the Department is satisfied of the absolute purity of the lymph the compulsory regulation ought not to be introduced. If any improvements were to be effected as Mr. Karve ~~thoug~~ thought, suitable action must be taken before the compulsory law can be introduced.

Dr. Amritraj thought that cases of children dying after vaccination were almost as a rule the result of neglect on the part of parents. He compared lymph obtained from Guindy, Belgaum and Bangalore and found the local lymph gave very good results. To say that vaccination should not be made compulsory on the mere apprehension that lymph might fall short of the standards of ~~potency~~ purity was very unreasonable. Vaccination might in his opinion be made compulsory in sections if not for the entire State.

The following resolution was adopted -

V.

This Conference is of opinion that compulsory vaccination and revaccination should be introduced throughout the State.

Subject No. 6 - Popular education in Public Health matters

The President remarked that ignorance was the chief obstacle to the progress of sanitation. There was, he thought, hardly any doubt that most of the religious observances of the Hindus were originally based on principles of Hygiene. As in most mundane things, the spirit in which the ordinances were originally framed was lost sight of and the letter followed with disastrous results. The present conditions and environments were different from what they were in the times of Manu and all thinking people recognised the necessity for adaptation. The only way to sanitary salvation was through the enlightenment of the masses. It was his experience that unsophisticated villagers were more susceptible to reason than the self-satisfied townsmen. Something in the way of popular lectures, demonstrations and exhibitions had been attempted but with no very striking results. The President invited any further suggestions on this topic.

Mr. M.A. Narayan Ayangar said that simple songs in Kannada on health subjects, such as the one composed by Mr. Karve should be prepared and distributed widely. He also recommended lectures and discussions of sanitary matters in all Taluk and District Conferences.

The following resolution was adopted -

VI.

This Conference is of opinion that (a) all teachers employed in schools should have undergone a course in

in sanitation and hygiene,

(b) a course in hygiene and sanitation should be made compulsory in elementary schools,

(c) Leaflets on hygiene and sanitation, preferably in the form of simple songs, should be published and itinerant lecturers appointed,

(d) Health Exhibitions and Demonstrations should be held periodically,

(e) Health Museums should be established in all District Head Quarter Towns and

(f) Lectures on sanitation should be arranged for and sanitary subjects discussed at every Taluk and District Conference.

Subject No. 7 - Systematisation in the improvement of rural water supplies -

The President said that this was an extremely important subject which had evoked much talk but small result. The question of combating Cholera and incidentally of diarrhoea, dysentery and worms was closely connected with the improvement of water supply. When the supply was from draw wells it was much easier to deal with than if from step wells, hondas, tanks, streams and rivers.

Mr. B.T. Kesava Iyengar thought that a systematic programme should be drawn up in the order of urgency and of importance of the village so that ultimately every village might have at least one well fitted with pump. The cost should preferably be debited to local funds and in every case the approval of the Sanitary Commissioner should be obtained.

Mr. M.A. Narayan Ayangar referred to the difficulty for a layman to decide the type of pump suitable in each case. He said that his own experience was that in 5 or

or 6 villages in which pumps were tried they soon got out of order.

Messrs. B. Subba Rao and J.V. Karve then explained how Myer's pumps could easily be set right.

VII.

The following resolution was adopted -

This Conference is of opinion that a definite programme of improvement should be framed and that as far as possible the villages in each District should be fitted up with Myer's pumps every year.

Subject No. 8 - The problem of housing the poor in the Bangalore and Mysore Cities. -

The President introduced the subject with the remark that it was one that had received but little attention although very important. He was familiar with the housing conditions in Bangalore and believed that they were more or less similar in Mysore. There could be no question that some definite action was called for in the interests of both public Health as well as the aesthetic improvement of the Cities. In Bangalore City there were a large number of mill-hands who came largely from the adjacent Tamil Districts in the Madras Presidency. They had no wish to settle in Bangalore and very often lived without their families. They were wage earners, pure and simple and most of their wages were sent to their families outside the State. They spent as little as possible and did not pay more than a rupee or a rupee and a half in the shape of house-rent. Many of the houses in Arlepet and other places in the neighbourhood of the Railway Station were occupied by these Tamilians and in each house there were as many tenants as there were rooms so that a house that

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that could accommodate 6 persons was found to have any number between 25 and 30. The problem of housing these people had to be considered by the Municipality as well as the large employers of labour viz., the Railway Company, Messrs. Binny and Co., etc. The European employees of the Companies were provided with quarters but the Indian labourers were allowed to shift for themselves. The evils of overcrowding were well known and the President invited suggestions in dealing with the problem.

Mr. J.V. Karve observed that the appointment of City Improvement Trust Boards did not touch the problem to any appreciable extent.

Mr. N. Subba Rao explained that what was needed was the construction of a large number of houses for the accommodation of the poor. He recommended that facilities should be created for the supply of building materials at cost price to bonafide builders among the poor classes. At the same time the tendency for speculation in the matter of building sites should be checked by fixing an upset price on them instead of giving them away in public auction. This latter recommendation was ~~supplied~~ supported by several others present.

Mr. M.A. Narayan Ayangar referred to the desirability of making arrangements to provide either houses or suitable sites not far distant from the Cities for people displaced consequent on the demolition of a large number of houses taken on hand for one reason or another. Co-operative Methods might easily be applied or the Trust Board itself might undertake the construction of houses which might be let out on the rent-purchase system. In any case, a definite allotment of funds should be made annually by Government and a suitable plan of work and procedure devised.

devised.

After further discussions the following resolutions was adopted:

VIII.

This Conference is of opinion that

(a) Congested areas should be opened out, special facilities being given to displaced men.

(b) As far as possible suitable dwellings for the working classes should be constructed in the areas opened out, such houses being rented out, sold on hire purchase system or sold outright.

(c) The present method of giving only loans through the Trust Boards has not been sufficient and should give place to a better arrangement.

(d) Large employers of labour should be required to provide housing accommodation for their employees, reasonable facilities therefor being offered by the Municipalities aided by Government, and

(e) A definite allotment of funds be made annually towards encouraging the co-operative movement in house-building, construction of model sanitary houses and provision of dwellings for sale on the rent-purchase system.

Subject No. 9- Town planning for all urban areas in the State -

The President remarked that the question was intimately connected with the one immediately preceding. If accommodation of satisfactory kind were provided for the class of persons who now flock to the Cities in search of employment, the slums could easily be taken on hand and systematic efforts made to adhere to any approved scheme for town planning. It was a matter wherein the co-operation of Engineers and architects was

was necessary.

Mr. M.A. Narayan Ayangar said that a special Engineer should be appointed to draw up plans for towns and for all urban areas generally. He suggested the operations being classified into three grades - for District Head Quarters, for Taluk Head Quarters and for rural areas. He thought that the co-operation of the members of the representative assembly might be enlisted in the matter with advantage.

After discussion, a resolution as follows was adopted

VIII.

This Conference is of opinion that town planning schemes should be taken up, arranged in three grades (1) for District Head Quarters (2) for Taluk Head Quarters and (3) Villages.

Subject No. 10 - Establishment of Tuberculosis Dispensaries and of a sanatorium in a specially selected locality -

Mr. J.V. Mascarenhas introduced the subject with the remark that tuberculosis was largely prevalent in the congested portions of Cities and of the larger towns. He explained that efforts for its prevention should be directed towards detecting early cases and taking such action as is calculated not merely to cure the patient but also to lessen the chances of his conveying the disease to others. The individual attention and close watch necessary for the purpose without at the same time having to resort to the extreme measure of isolating all tuberculous patients in the area, could be secured only by the employment of a special Medical Officer, with a Dispensary in his charge, to find out and suitably deal

deal with cases of tuberculosis. He added that a Laboratory should be attached to the Dispensary so as to facilitate the systematic examination of sputum for confirmatory purposes.

Mr. E.S. Krishnaswami Iyer, in supporting, said that in dealing with the question of tuberculosis in its relation to the community as a whole, the aim should be the effective control of the disease rather than the medical treatment of individual patients. He also referred to the danger of infection being also spread by dogs.

The President remarked that according to the recorded statistics one in 50 persons in the Bangalore City and one in 40 in the Mysore City harbour Tubercle Bacilli in their bodies. It was therefore time that the control of the disease was taken on hand. A sanatorium by itself was of little value unless at the same time it served as a complementary institution to the special Tuberculosis Dispensaries. He explained the fundamental difference between an ordinary Dispensary and a Tuberculosis Dispensary, which consisted in the Medical Officer in the case of the latter being required to pay a house to house visit in search of cases instead of merely keeping the Dispensary open for the benefit of those that sought treatment.

After discussion, a resolution as under was passed:

X.

This Conference is of opinion that the treatment of patients in a sanatorium being by itself not conducive to check the spread of Tuberculosis, Tuberculosis Dispensaries which are essential for the detection and treatment of early cases - may be established in the midst of congested areas in the Bangalore and Mysore Cities.

Cities.

Subject No. 11 - Ankylostomiasis in the Malnad and in the maidan parts of the State -

Mr. M.C. Srinivasa Peidpett explained the aetrology of the disease and said that the symptoms were hardly different from those of malnad malaria. In fact it was often mistaken for malaria and treated with quinine. To his knowledge, the disease occurred in parts of Mandya, Hunsur and Krishnarajapet.

Mr. Parthasarathi said that the disease prevailed in Soralakoppa - a village in the Shimoga District - where 17 cases were treated.

Mr. J.V. Karve related how the accidental examination of stools of men in the malnad revealed hook-worms. He suggested the appointment of a special officer with a view to ascertain where and to what extent the disease prevails, what the specific local conditions are that favour its prevalence and whether the practice of earth-eating said to prevail in certain parts of the Mysore District is responsible for or contributes towards the occurrence of the disease.

The following resolution was passed -

XI.

This Conference is of opinion that the special study and investigation into the prevalence of Ankylostomiasis (or hook-worm disease) deserved to be taken up immediately in Hunsur, Krishnarajapet, and Mandya Taluks and 3 more malnad taluks to be selected later on.

Subject No. 12 - Prevalence of venereal disease in parts of the malnad and its relation to the deterioration of the people.

people.

Mr. P. Parthasarathi in moving the subject said that his own impressions based on what he saw as District Sanitary Officer, Shimoga District, were that venereal disease prevailed to a large extent in certain parts of the District and contributed not a little towards infant mortality, still-births and a general decline in the physical efficiency of the people. The problem was complicated by the operation of various social customs and rules - one amongst which was what is known as the Terrai system. Under this system only the eldest son could marry and the younger sons naturally resorted to bad ways. In Sagar out of a total of about 700 houses, 250 were inhabited by prostitutes. Such widespread prevalence of immorality reacted on the normal family life and resulted in the spread of venereal diseases, abortions and high infantile mortality. These circumstances, he thought justified a detailed enquiry being taken on hand immediately.

Mr. B. Krishna Rau presented certain hospital statistics which showed that on an average .27 per cent of the cases treated in the Hospitals and Dispensaries of the Kadur District were for venereal complaints.

Mr. Zahiruddin Meccai pointed out that all such figures must be considered with reference to the population of each local area. A comparative table of the number of prostitutes in each of the towns in proportion to population might he thought, be found useful. He recommended that a detailed survey for venereal complaints may be carried out in typical towns.

As regards practical remedies, he advocated the dissociation of houses of questionable repute from town or City proper and the resulting attachment, by implication

implication, of a sense of dishonor in frequenting these localities. He recommended the licensing of prostitutes.

Other suggestions considered were the introduction of sex education in schools and Colleges, the education of the masses in sex morality and the provision of special facilities for the treatment of venereal diseases in men and women.

After discussion, the following resolution was adopted:

XII.

This Conference is of opinion that there is sufficient basis to justify an enquiry being held to determine the extent of prevalence of venereal diseases in the State, especially in the malnads, and that for this purpose typical towns like Sagar, Thirthahalli, Davanagere and Chikballapur may be selected.

Subject No. 13 - Control of infantile mortality -

Dr. Amritraj said that some of the causes ~~of the~~ for the heavy infantile mortality that prevails in the State particularly in large towns were bad midwifery aid or absence of such aid altogether, neglect of children due to want of experience or blind adherence to traditional customs and improper feeding of infants. The wastage of infant life was largely preventable provided only that the prevailing crude notions among the people gave place to rational ideas and methods. All measures directed towards improving matters in this respect must also aim at serving as object lessons tending to the formation of altered habits among the people. He gave an account of the efforts made in the Bangalore Civil and Military Station Municipality how they had established a creche for looking after the children taken there and

and had also appointed a Lady Health visitor. He said that the supply of pure milk for the use of children and the appointment of a larger number of trained midwives would mitigate infantile mortality to a very considerable extent.

Dr. J.V. Karve urged the establishment of nursing institutions in all Municipalities particularly in the malnad Districts.

The President suggested that creches might to begin with, be established in the Bangalore and Mysore Cities and on the Kolar Gold Fields. As regards Lady Health visitors he said that only women could understand women. An arrangement whereby medical advice by a competent Lady Medical Officer is readily made available to all women needing it would be of incalculable value. The Lady Health ~~Officer~~ Visitor systematically visits every house with a view to give particular attention to women in delicate health, nursing mothers and infants, mingles with the women, infuses correct ideas among them and gives medical advice. She should be well-paid and provided with free quarters in a central locality.

The establishment of milk depots controlled by the Municipalities for the supply of pure milk for children was another proposal worth serious consideration.

Mr. M.A. Narayan Ayangar suggested that an appeal might be made to the generosity of philanthropic gentlemen to establish creches and milk depots.

Mr. Zahiruddin Maccai recommended that these measures might be extended to all District Head Quarter towns and that Itinerant Lady Health visitors may be appointed for selected rural areas as well.

A resolution as under was adopted;

adopted:

XIII.

This Conference, while recognising that heavy infantile mortality is prevalent all throughout the State, is of opinion that a beginning should be made to check it in the Cities of Bangalore, Mysore and Kolar Gold Fields by the adoption of the following measures for the present:-

(1) Appointment of Lady Health Visitors, (2) establis establishment of creches, and (3) supplying at cost price pure and sterilized milk for the use of the childrens.

Subject No. 14 - Formation of a standing committee and issue of a quarterly Public Health Journal under the auspices of the Conference -

The members were unanimously agreed on this subject and adopted a resolution as follows:

XIV.

This Conference is of opinion (1) that a standing public Health Committee constituted as under should be appointed with Head Quarters at Bangalore and (2) that a quarterly Public Health Journal should be issued under the auspices of the Sanitary Conference.

The Sanitary Commissioner - President.

The Assistant Director,
Public Health Institute - Secretary.

The Health Officers of Bangalore and Mysore Cities, Dr. S. Amritraj, Mr. Lakshminarasappa, Mr. J. Bhore, District Sanitary Officer, Shimoga, and one non-official member. - Members.

The discussions were concluded with the following remarks by the Sanitary Commissioner:

I am glad that we have been able to get through our programme of work this session. The discussion in

in various subjects has thrown a flood of light on various obscure points. The recommendations that we are submitting to the Government relate to matters of pressing importance. As regards the control of a Plague epidemic, the resolutions of the Government of India was that wholesale evacuation of villages is ~~not~~ neither necessary nor desirable. The Executive Officers will no doubt in view of this, take such measures as the Conference has recommended viz., the immediate disinfection of houses by desiccation after the appearance of a dead rat. Wherever possible the larger Municipalities should insist of all new buildings being made rat-proof. Our freedom from Plague seems to depend upon our keeping away from the vicinity of rodents as much as possible.

The Conference has emphasised the necessity of taking continuous measures against malaria all throughout the year, in accordance with the data revealed by the preliminary rural survey.

The recommendations of the Conference into the prevalence of venereal diseases and of ankylostomiasis in various parts of the Mysore are very timely. Next year if we ever meet again , we shall consider the questions of remedial measures against these ~~applications~~ diseases.

To control infantile mortality in large Cities we have made very modest suggestions which the local bodies must carry out.

Rural water supplies come under the purview of the District and Taluk Boards and the adoption of measures we have suggested will go a great way towards giving the rural population a fairly safe water supply.

The questions of housing the poor and of town planning have been dealt with and I feel that unless the Government comes forward with funds for the building of

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of workmen's dwellings near their ~~seats~~ sites of employment, no other agency can cope with the problem.

The necessity for Tuberculosis Dispensaries rather than of sanatoria is now-a-days well recognised. The The Medical Officers conducting these Dispensaries will deal with the very early cases and prevent the spread of the disease, ~~which~~ while sanatoria attempt to lessen the severity of the disease when it has passed beyond the stage of cure. The local bodies should deal with this problem and may receive grants-in-aid from the Government.

I am thankful to the Heads of Districts for having so readily responded to my invitations and giving us the benefit of their advice and experience. I trust that a greater co-operation with the Public Health Officers and a free interchange of views ~~with~~ will tend to a better condition of sanitary administration than any number of official communications. I am grateful to all of you who have made the holding of a Conference like this possible and look forward to a similar re-union next year.

M.A., M.D., D.P.H.,
Sanitary Commissioner.

P.H.

G.R.S. VI-71]

SUBJECT Sanitary Conference

Diary No. of letter replied to 1937

Section Law
File No. 22-G
Serial No. 2

General and Revenue Secretariat
(Sanitary)
, the 191

Proceedings of the Government of His Highness the Maharaja of Mysore.

Date of issue 15. 8. 18

Signed by Mr. G. Srinivasa Iyr

Read.— Letter no G.C76 dated the 29th July 18, from the Sanitary Commissioner, submitting a report on the proceedings of the Sanitary Conference held at Mysore on the 22nd June 1918.

May this be

i Printed?

ii treated as a standing order?

iii published in the Gazette English part?

iv translated?

v placed at the disposal of the press?

vi published in the Gazette Kannada part?

Order ~~Thereon~~:— No. G. 3453. Recorded

2. The Sanitary Commissioner is requested to make separate reference on each

over.

39

of the points requiring orders

of Govt.

Received
9/8/18.

List of enclosures.

Copied by

Examined by

Hrs 10-18

G. R. S. VI—G/32]

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SUBJECT.....

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Diary No. of letter replied to.....

Section Leng

File No. 22-18

Serial No. 3

GENERAL AND REVENUE SECRETARIAT,

the Sanitary 191

No. G 3782

Date of issue 20-8-18

To

Signed by Asst G. S. Iyer

The Sanitary Commissioner

Sir,

In continuation of Govt. Pr. No. G 3453 of the 15th August 18, Sec 22-18-2 I am directed to state that the report and papers read at the Sanitary Conference may be printed at the Govt. press and a dozen copies sent to this office for reference.

I have &c

for Chief Secretary

over.

P.T.O

G.2 1911

No Copies 4 2 1

41

Memo

Copy to the Superintendent, Govt. Press, Bangalore, for information.

By order

Sd/- [illegible]

[illegible]

List of enclosure

Copied by

Examined by

WD 86—GPB—60,000—15-11-16